Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000173559 3)))



H180001735593ABC6

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. ......

To:

Division of Corporations

Fax Number : (850) 617-6353

From:

Account Name : TAXLEAF.COM INC Account Number : 120140000084 Phone : (305)541-3980 Fax Number : (888)772-8108

\*\*Enter the email address for this business entity to be used for annual report markings. Enter only one email address please

Email Address:\_\_\_\_\_

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 3BOOMERS, LLC

THE EARLY COUNTY OF THE SHEET O	,
Certificate of Status	0
SCertified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help =

**B FIGUEROA** 

JUN 1 1 2018

8

### H18000173559 3

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

any as it now appears on our records.) Liability Company)	
y were filed on 05/08/2018	and assigned
bility company here:	
bility Company," the designation "LLC" or th	e abbreviation "L.L.C."
1549 NE 123RD ST	
NORTH MIAMI, FL 33161	23
	E C.
1549 NE 123RD ST	- 8 - 8
NORTH MIAMI, FL 33161	
	三 <u>八</u>
office address on our records, <u>ente</u> re:	
Enter Florida street address	,
. Florida	
, 1 (V) (d4 _	Zin Code
	1549 NE 123RD ST  NORTH MIAMI, FL 33161  1549 NE 123RD ST  NORTH MIAMI, FL 33161  office address on our records, entere:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

### H18000173559 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR - Authorized Member Title Name Address Type of Action 9839 NW 32ND ST ROCHA LIMA E SILVA, ADRIANO **AMBR DORAL, FL 33172** 🖪 Remove 1549 NE 123RD ST **AMBR** ROCHA LIMA E SILVA, ADRIANO EbA. 🖬 NORTH MIAMI, FL 33161 9839 NW 32ND ST OLIVER SANTOS, RAFAEL AMBR **DORAL, FL 33172** 1549 NE 123RD ST **AMBR** OLIVER SANTOS, RAFAEL NORTH MIAMI, FL 33161 \_□ Remove \_□ Remove

### H18000173559 3

	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
{	Effective date, if other than the date of filing:
	Dated JUNE, 4TH 2018
	Maux
	Signature of Machael or authorized representative of a member ADRIANO ROCHA LIMA E SILVA
	Typed or printed name of signee

Page 3 of 3

2018 JUN -8 PM 1:07